- 4	
Docket No.:	

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

he invention entitled:		•				
IMAGE FORMIN	G APPAR	ATUS AND MET	HOD			
described and claimed in	a the specificat	tion:		•		
Check one						
	tached hereto.			Carlol Ma	and	
			is Application	Seriai No	and	
(if app I hereby stat claims, as amended by a I acknowled defined in Title 37, Cod	iny amendmen ge the duty to le of Federal R	nt referred to above. o disclose to the Office egulations, § 1.56.	e all informat	ion known to	e-identified application, including t	
Under Title provisional application(35 U.S. Code (s) filed within	\$ 119, the priority be one year prior to this	enefits of the fo application are	ollowing forei hereby claims	gn application(s) and/or United Sta ed:	
Japanese Pate	nt Application	on No. 2003-06049	7, filed on M	farch 6, 200	3	
The following the United States of A above-named foreign process.	ng application america either riority applicat	(s) for patent or inven (a) more than one y tion(s) and/or United S	tor's certificate ear prior to th states provision	on this inventis application all application	tion were filed in countries foreign t, or (b) before the filing date of (s):	
the Customer Number Office connected there	provided belo with, and direc	w to prosecute this age to that all corresponder	inlication and	to transact all	an, Lewis & Bockius LLP included business in the Patent and Tradem omer Number.	
	Number: 00					
herein of my own kno	wledge are tr ments were man	ue and that all statem ade with the knowleds under Section 1001 of	ents made on ge that willful f Title 18 of	information a false statemen the United St	claration, and that all statements mand belief are believed to be true; at sand the like so made are punishates Code and that such willful fa	
Typewritten Full Name of Sole or First invento) vr•	Keiji			YAMAMOTO	
Of Pole of Large Weather		Given Name	Middle	Initial	Family Name	
**Inventor's Signature	· :	Keiji			Yamamo to	
**Date of Signature:		8	/	22	1/2003	
Date of Digitalization		Month		Day	Year	
Residence:	Ebina-shi	•	Kanagawa	•	Japan	
	City		State of Provi	nce	Country	
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(Insert complete mailing address, including country)		Ebina-shi, Kanagawa, Japan				
				•		

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN " \times " HERE $\ igstar$

^{*}This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.

^{**}Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

PAGE 2 OF U.S.A. DECLARATION FORM

Typewritten Full Name		Ryo			ANDO		
of Second Joint invento		Given Name	Middle)	Initial	Family Name		
##Inventor's Cignoture		Rya	1/110010		Ando		
**Inventor's Signature	•	70,00	7	25	/ 2003		
**Date of Signature:		Month		Day	Year		
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Citizenship:	0.1.,	Japan					
-		c/o Fuji Xerox Co.	Ltd., 2274,	Hongo,			
Post Office Address: (Insert Complete mailing address, including country)		Ebina-shi, Kanaga					
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Tomorovitton Bell Nome	•						
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		Given Name	Middle	Initial	Family Name		
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**Date of Signature:		8		25	1 2003		
Date of biginature.		Month		Day	Year		
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of Fourth Joint invent	or:	Satoru			TORIMARU		
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**Date of Signature:		8		2.2	1. 2003		
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**Inventor's Signatus		Takash) Initial	Kawabata		
_	ic.				1 2003		
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Davidanası	Ebina-shi	(*IOIId.	Kanagawa		Japan		
Residence:	City		State of Prov		Country		
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^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

PAGE 3 OF U.S.A. DECLARATION FORM

of Sixth Joint inventor:		Katsunori			KIKUCHIHARA
of Sivili Joint Machini.	•	Given Name	Middle	Initial	Family Name
**Inventor's Signature	<u>!</u>	Hatsinorú			Mkuchihara
	••	0		2.2.	/ 2003
**Date of Signature:		Month		Day	Year
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Residence.	City		tate of Prov	ince	Country
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address, including country)	_	201111 012, 1511-8-1	· 		
Tempermitten Bull Nom					•
Typewritten Full Name of Seventh Joint inven	tor:	Masaaki		٠	TAKAHASHI
0. 50 (0.11 0.11 0.11 0.11 0.11 0.11 0.11 0.11		Given Name	Middle	e Initial	Family Name
**Inventor's Signature	e:	masaaki			Jakaheshi
**Date of Signature:		8	_/	25	/ 2003
Date of organization		Month		Day	Year
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Citizenship:		Japan			
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marin, minute commer,					
Typewritten Full Nam	ne				
of Eighth Joint invent		Yoko			MIYAMOTO
		Given Name	Middl	Family Name	
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**Date of Signature:		8	7	22	/ 2003
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	<u>.</u>				•
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of Ninth Joint inventor:		Satoshi			MATSUZAKA
		Given Name Middle Initial			Family Name
**Inventor's Signature:		_ Satoshi			Hatsuzaka
**Date of Signature:		8		_ ير	12005
	TTIL town 18 f	Month	Vanager	Day	Year
Residence:	Ebina-shi		Kanagawa		Japan Cauntar
	City	Ioman	State of Pro	vince	Country
Citizenship:		Japan	T . 1 . 000	V 11	
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PAGE 4 OF U.S.A. DECLARATION FORM

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**Date of Signature:		7 8 /	1 22	1 5004
Dute of organization	•	Month	Day	Year
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Typewritten Full Nam of Eleventh Joint inver	e ntor:	Given Name	Middle Initial	Family Name
**Inventor's Signature	: :			
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		Month	Day	Year
Residence:	O't-		State of Province	Country
Chihim.	City		State of Free moo	
Citizenship:				
Post Office Address: (Insert Complete mailing address, including country)	,		<u></u>	
Typewritten Full Nam of Twelveth Joint inv	ne entor:	Given Name	Middle Initial	Family Name
**Inventor's Signatus	e:	Given Name	Wildelf Indas	
**Date of Signature:				
Date of Organica.		Mont	h Day	Year
Residence:				Country
	City		State of Province	Country
Citizenship:				
Post Office Address: (Insert Complete mailing address, including country)				
Typewritten Full Nat of Thirteenth Joint in	ne ventor:		Various	Family Name
***		Given Name	Middle Initial	Failing Name
**Inventor's Signatu				
**Date of Signature:		Mont	h Day	Year
Residence:			· · · · · · · · · · · · · · · · · · ·	
,,,,,	City		State of Province	Country
Citizenship:	-			
Post Office Address: (Insert Complete mailing address, including country)				
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